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## BIB DATA SHEET

CONFIRMATION NO. 8077

| SERIAL NUMBER | FILING or 371(c)<br>DATE<br>RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO.    |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/808,919    |                                  | 606   | 3739           | 08-045301US/82410.0170 |

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/537,092 01/16/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
06/03/2004

| Foreign Priority claimed        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|---------------------------------|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <i>pv</i><br>Initials                        | MN               | 18              | 84           | 6                  |

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## TITLE

Brush electrode and method for ablation

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>2310 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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